

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|----------|
| FEE DETERMINATION | VAN TRONIG | | 06-01-01 |
| O.I.P.E. CLASSIFIER | | 42 | 6/13/01 |
| FORMALITY REVIEW | H.L | 1079 | 08/01/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy